



**PROVIDER REPORT
FOR**

**WORK INC
25 Beach Street
Dorchester, MA 02122**

December 15, 2015

Version

Provider Web Report

**Prepared by the Department of Developmental Services
OFFICE OF QUALITY ENHANCEMENT**

SUMMARY OF OVERALL FINDINGS

Provider	WORK INC
Review Dates	11/12/2015 - 11/18/2015
Service Enhancement Meeting Date	12/1/2015
Survey Team	Patty McCarthy Leslie Hayes Lisa MacPhail Barbara Mazzella Mark Boghoian (TL) Raymond Edi-Osagie Cheryl Hampton Danielle Vautour

Survey scope and findings for Residential and Individual Home Supports

Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level
Residential and Individual Home Supports	8 location(s) 8 audit (s)	Full Review	76 / 80 2 Year License 12/01/2015 - 12/01/2017		
Residential Services	5 location(s) 5 audit (s)			Deemed	
Individual Home Supports	3 location(s) 3 audit (s)			Deemed	

Survey scope and findings for Employment and Day Supports

Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level
Employment and Day Supports	2 location(s) 9 audit (s)	Full Review	49 / 52 2 Year License 12/01/2015 - 12/01/2017		
Community Based Day Services	1 location(s) 4 audit (s)			Deemed	
Employment Support Services	1 location(s) 5 audit (s)			Deemed	

Survey scope and findings for Planning and Quality Management

Service Group Type	Sample Size	Scope	Licensure Level	Certification Scope	Certification Level
Planning and Quality Management	N/A	N/A	N/A	Deemed	0/0 Certified

EXECUTIVE SUMMARY:

Work Inc. is a non-profit human service agency that recently celebrated its 50th anniversary. The organization serves the needs of people with developmental disabilities, chronic mental illness and physical disabilities, and offers specialized services to individuals who are Deaf or hard of hearing. The agency provides twenty-four hour residential supports to 77 individuals and individual home supports (IHS) to 60 individuals. It provides supported competitive employment to 98 individuals, group supported employment to 47 individuals and community based day supports (CBDS) to 192 individuals. Work Inc. services are integrated within three DDS regions. Area offices include Greater Boston, South Coastal, North Central and New Bedford. For this DDS review, the agency chose to deem its certification through its current three-year CARF accreditation; therefore, only a DDS licensing review was conducted. For the purpose of this licensing evaluation; 5 audits were conducted at twenty-four hour homes, 3 audits were conducted at IHS locations, 5 audits were conducted for employment supports, and 4 audits were conducted at CBDS.

The organization had established and accomplished numerous initiatives that were geared directly towards service improvement. Through expanding and renovating its corporate property, it developed a janitorial training program that leads to a nationally recognized training certificate regardless of disability. The agency also took over a previously established culinary training program within its existing headquarters and now provides its own education/training in food preparation and delivery through its working cafeteria. A concerted effort was also taken to expand the agency's provision of deaf services. Residentially, several two-person, twenty-four hour homes were developed to accommodate the specific accessibility needs of the population. Additionally, the agency was funded by DDS to launch expanded services in this area by offering "Deaf Outreach, Support and Consultation" to individuals eligible to receive services through DDS that are not otherwise receiving such services. Furthermore, the agency expanded its thriving Ability One (competitive employment) contracts to include employment opportunities for three individuals at the Springfield Courthouse.

Residentially, the agency was found to be in substantial compliance with DDS Licensing measures in great part due to its ongoing quality assurance and oversight systems. For example, the agency consistently ensured that homes remained in good repair and that any immediate issues were addressed. In addition to ongoing monitoring by house managers, each residence was routinely inspected by management as well as the agency's Health & Safety Committee. Issues were prioritized via the agency's maintenance manager and its 24 hour on-call maintenance division. Similarly, the agency provides 24 hour nursing and consultation for any situations that may arise. Staff in conjunction with nursing ensured that individuals received routine and specialized services when required. Through interviews with staff within the homes it was determined that staff were knowledgeable of people's backgrounds and preferred methods of communication which included augmentative devices for the deaf and hard of hearing. This review confirmed that systems had been established to address areas identified through previous reviews and significant improvement in several areas was evident. Some of these areas included: enhancement of staff's implementation of ISP support strategies and documentation of progress; ensuring that staff had documented training relative to the use and implementation of health related protections; and, refinement in the way in which the agency documents the expenditure of individuals' funds.

The organization's Day Support Services including Employment and CBDS were also found to be in substantial compliance with DDS Licensing measures. Relative to employment supports, interviews with staff and individuals confirmed that people wanted to be employed where they were currently working. It was noted that they felt they were a part of their places of employment and that they had natural connections to others who worked there. People were frequently paid above minimum wage and were offered benefits available to non-disabled workers at the same location. It is significant that employees at the Ability One worksites were now offered private health insurance, dental insurance, life insurance,

and vacation/sick time benefits. At the agency's CBDS location, people were supported to choose and engage in a variety of in-house activities and educational trainings, as well as, explore their communities and take various trips to places of their choosing. As such, people had gone apple picking and took tours of various museums in Boston and the aquarium. Similarly, Deaf individuals were supported to attend various events held in the community that fostered connections with others who were also Deaf and/or hard of hearing.

There were only a few indicators identified where additional emphasis needs to occur. Moving forward organizationally, the agency needs to focus on ensuring that its Human Rights Committee is fully constituted and that its professional and required members attend meetings on a regular basis. The agency also needs to ensure that restraint information is submitted into HCSIS and reviewed by agency management within the required timeframes. With specific regard to IHS, the agency needs to ensure that it assesses individuals' skills in regard to water safety when applicable and that it specifically documents the education/support offered to those individuals that are prescribed specialized diets. Also, although significant improvement was noted, supervisors at CBDS should continue to monitor staff's implementation of people's ISP support strategies and the documentation of progress.

In summary, across all settings, Work Inc. continues to provide quality services to the individuals it supports. The agency received a rating of 95% Met for all applicable residential Licensing indicators and a rating of 94% Met for employment/day supports services. Therefore, the agency will receive 2 Two-Year Licenses. The agency will conduct its own follow-up on those indicators that were not met within 60 days of the Service Enhancement Meeting.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	7/9	2/9	
Residential and Individual Home Supports	69/71	2/71	
Residential Services Individual Home Supports			
Critical Indicators	8/8	0/8	
Total	76/80	4/80	95%
2 Year License			
# indicators for 60 Day Follow-up		4	

	Met / Rated	Not Met / Rated	% Met
Organizational	7/9	2/9	
Employment and Day Supports	42/43	1/43	
Community Based Day Services Employment Support Services			
Critical Indicators	7/7	0/7	
Total	49/52	3/52	94%
2 Year License			
# indicators for 60 Day Follow-up		3	

Organizational Areas Needing Improvement on Standards not met/Follow-up to occur:

Indicator #	Indicator	Area Needing Improvement
L48	The agency has an effective Human Rights Committee.	The agency's Human Rights Committee was not fully constituted as it lacked a third community advocate; and, two required professional members (the medical professional and the legal representative) did not attend meetings on a regular basis. The agency needs to ensure that it maintains a fully constituted committee whose required members attend meetings on a regular basis.
L65	Restraint reports are submitted within required timelines.	The agency did not submit restraint reports into the HCSIS system and/or complete the required agency's manager review within the established timeframes. The agency needs to examine its current process for reporting this information and develop a more effective process to support the agency to meet the required timelines.

Residential Areas Needing Improvement on Standards not met/Follow-up to occur:

Indicator #	Indicator	Area Needing Improvement
L27	If applicable, swimming pools and other bodies of water are safe and secure according to policy.	The agency had not completed an individual water safety assessment in accordance with DDS policy, as required. The agency needs to ensure that it complies with all aspects of the DDS water safety policy.
L39	Special dietary requirements are followed.	The agency did not consistently ensure that it supported individuals to follow prescribed special dietary requirements. The agency needs to ensure that it provides relevant education (to individuals), develops individualized strategies and maintains documentation relative to providing education and support to individuals who have special dietary requirements.

Employment/Day Areas Needing Improvement on Standards not met/Follow-up to occur:

Indicator #	Indicator	Area Needing Improvement
L88	Services and support strategies identified and agreed upon in the ISP for which the provider has designated responsibility are being implemented.	The agency did not ensure that identified strategies developed for individuals' ISP's were implemented and that progress related to the achievement of the goals were documented. The agency needs to ensure that it supports individuals to achieve their established ISP goals by implementing strategies identified and agreed upon in the ISP and documenting progress toward their achievement.

MASTER SCORE SHEET LICENSURE


Organizational: WORK INC

Indicator #	Indicator	Met/Rated	Rating (Met, Not Met, Not Rated)
Ⓟ L2	Abuse/neglect reporting	7/7	Met
L3	Immediate Action	3/3	Met
L48	HRC	0/1	Not Met(0 %)
L65	Restraint report submit	28/65	Not Met(43.08 %)
L66	HRC restraint review	57/65	Met(87.69 %)
L74	Screen employees	6/7	Met(85.71 %)
L75	Qualified staff	2/2	Met
L76	Track trainings	20/20	Met
L83	HR training	20/20	Met

Residential and Individual Home Supports:

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI- MFP Res. Sup.	ABI- MFP Place.	Total Met/Rated	Rating
L1	Abuse/neglect training	I	5/5	3/3					8/8	Met
L5	Safety Plan	L	5/5	3/3					8/8	Met
Ⓟ L6	Evacuation	L	5/5	3/3					8/8	Met
L7	Fire Drills	L	5/5						5/5	Met
L8	Emergency Fact Sheets	I	5/5	2/3					7/8	Met (87.50 %)
L9	Safe use of equipment	L	5/5	3/3					8/8	Met
L10	Reduce risk interventions	I	1/1						1/1	Met
Ⓟ L11	Required inspections	L	5/5	3/3					8/8	Met
Ⓟ L12	Smoke detectors	L	4/5	3/3					7/8	Met (87.50 %)
Ⓟ L13	Clean location	L	5/5	3/3					8/8	Met
L14	Site in good repair	L	4/4	3/3					7/7	Met
L15	Hot water	L	5/5	3/3					8/8	Met
L16	Accessibility	L	4/4	2/2					6/6	Met
L17	Egress at grade	L	5/5	3/3					8/8	Met
L18	Above grade egress	L	2/2	2/2					4/4	Met
L19	Bedroom location	L	1/1	2/2					3/3	Met
L20	Exit doors	L	5/5	3/3					8/8	Met
L21	Safe electrical equipment	L	5/5	3/3					8/8	Met
L22	Clean appliances	L	5/5	3/3					8/8	Met
L23	Egress door locks	L	5/5						5/5	Met
L24	Locked door access	L	3/3						3/3	Met
L25	Dangerous substances	L	5/5	3/3					8/8	Met
L26	Walkway safety	L	5/5	3/3					8/8	Met

L27	Pools, hot tubs, etc.	L		0/1					0/1	Not Met (0 %)
L28	Flammables	L	5/5	3/3					8/8	Met
L29	Rubbish/combustibles	L	5/5	3/3					8/8	Met
L30	Protective railings	L	2/2	2/2					4/4	Met
L31	Communication method	I	5/5	3/3					8/8	Met
L32	Verbal & written	I	5/5	3/3					8/8	Met
L33	Physical exam	I	5/5	3/3					8/8	Met
L34	Dental exam	I	5/5	2/2					7/7	Met
L35	Preventive screenings	I	5/5	3/3					8/8	Met
L36	Recommended tests	I	5/5	3/3					8/8	Met
L37	Prompt treatment	I	5/5	3/3					8/8	Met
Ⓟ L38	Physician's orders	I	5/5						5/5	Met
L39	Dietary requirements	I	2/2	0/1					2/3	Not Met (66.67 %)
L40	Nutritional food	L	5/5	2/3					7/8	Met (87.50 %)
L41	Healthy diet	L	5/5	2/3					7/8	Met (87.50 %)
L42	Physical activity	L	5/5	3/3					8/8	Met
L43	Health Care Record	I	5/5	2/3					7/8	Met (87.50 %)
L44	MAP registration	L	5/5						5/5	Met
L45	Medication storage	L	5/5						5/5	Met
Ⓟ L46	Med. Administration	I	5/5						5/5	Met
L47	Self medication	I	4/5	2/2					6/7	Met (85.71 %)
L49	Informed of human rights	I	5/5	3/3					8/8	Met
L50	Respectful Comm.	L	5/5	3/3					8/8	Met
L51	Possessions	I	5/5	3/3					8/8	Met

L52	Phone calls	I	5/5	3/3					8/8	Met
L53	Visitation	I	5/5	3/3					8/8	Met
L54	Privacy	L	5/5	3/3					8/8	Met
L56	Restrictive practices	I	1/1						1/1	Met
L61	Health protection in ISP	I	3/3						3/3	Met
L62	Health protection review	I	3/3						3/3	Met
L63	Med. treatment plan form	I	5/5						5/5	Met
L64	Med. treatment plan rev.	I	5/5						5/5	Met
L67	Money mgmt. plan	I	5/5	1/1					6/6	Met
L68	Funds expenditure	I	5/5						5/5	Met
L69	Expenditure tracking	I	5/5						5/5	Met
L70	Charges for care calc.	I	5/5	2/2					7/7	Met
L71	Charges for care appeal	I	5/5	2/2					7/7	Met
L77	Unique needs training	I	5/5	3/3					8/8	Met
L78	Restrictive Int. Training	L	1/1						1/1	Met
L79	Restraint training	L	1/1						1/1	Met
L80	Symptoms of illness	L	5/5	3/3					8/8	Met
L81	Medical emergency	L	5/5	3/3					8/8	Met
 L82	Medication admin.	L	5/5						5/5	Met
L84	Health protect. Training	I	3/3						3/3	Met
L85	Supervision	L	5/5	3/3					8/8	Met
L86	Required assessments	I	5/5	1/1					6/6	Met
L87	Support strategies	I	5/5	1/1					6/6	Met
L88	Strategies implemented	I	5/5	3/3					8/8	Met
#Std. Met/# 71 Indicator									69/71	
Total Score									76/80	
									95.00%	

Employment and Day Supports:

Ind. #	Ind.	Loc. or Individ.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L1	Abuse/neglect training	I	4/5		4/4	8/9	Met (88.89 %)
L5	Safety Plan	L			1/1	1/1	Met
Ⓟ L6	Evacuation	L			1/1	1/1	Met
L7	Fire Drills	L			1/1	1/1	Met
L8	Emergency Fact Sheets	I	5/5		3/4	8/9	Met (88.89 %)
L9	Safe use of equipment	L	1/1		1/1	2/2	Met
Ⓟ L11	Required inspections	L			1/1	1/1	Met
Ⓟ L12	Smoke detectors	L			1/1	1/1	Met
Ⓟ L13	Clean location	L			1/1	1/1	Met
L14	Site in good repair	L			1/1	1/1	Met
L15	Hot water	L			1/1	1/1	Met
L16	Accessibility	L			1/1	1/1	Met
L17	Egress at grade	L			1/1	1/1	Met
L18	Above grade egress	L			1/1	1/1	Met
L20	Exit doors	L			1/1	1/1	Met
L21	Safe electrical equipment	L			1/1	1/1	Met
L22	Clean appliances	L			1/1	1/1	Met
L25	Dangerous substances	L			1/1	1/1	Met
L26	Walkway safety	L			1/1	1/1	Met
L28	Flammables	L			1/1	1/1	Met
L29	Rubbish/combustibles	L			1/1	1/1	Met
L31	Communication method	I	5/5		4/4	9/9	Met
L32	Verbal & written	I	5/5		4/4	9/9	Met
L37	Prompt treatment	I	2/2			2/2	Met
L39	Dietary requirements	I			1/1	1/1	Met

L44	MAP registration	L			1/1	1/1	Met
L45	Medication storage	L			1/1	1/1	Met
Ⓟ L46	Med. Administration	I			1/1	1/1	Met
L49	Informed of human rights	I	4/5		4/4	8/9	Met (88.89 %)
L50	Respectful Comm.	L	1/1		1/1	2/2	Met
L51	Possessions	I	5/5		4/4	9/9	Met
L52	Phone calls	I	5/5		4/4	9/9	Met
L54	Privacy	L	1/1		1/1	2/2	Met
L55	Informed consent	I	1/1		2/2	3/3	Met
L73	DOL certificate	L			1/1	1/1	Met
L77	Unique needs training	I	5/5		4/4	9/9	Met
L80	Symptoms of illness	L	1/1		1/1	2/2	Met
L81	Medical emergency	L	1/1		1/1	2/2	Met
Ⓟ L82	Medication admin.	L			1/1	1/1	Met
L85	Supervision	L	1/1		1/1	2/2	Met
L86	Required assessments	I	4/4		4/4	8/8	Met
L87	Support strategies	I	4/4		4/4	8/8	Met
L88	Strategies implemented	I	4/5		3/4	7/9	Not Met (77.78 %)
#Std. Met/# 43 Indicator						42/43	
Total Score						49/52	
						94.23%	

MASTER SCORE SHEET CERTIFICATION
